

**641—3.4 (135) Program components.**

**3.4(1)** The EHDI coordinator assigned within the department provides administrative oversight, including follow-up activities, for the EHDI program within Iowa.

**3.4(2)** The EHDI advisory committee represents the interests of the people of Iowa and assists in the development of programming that ensures the availability and access to quality hearing health care for Iowa children.

**3.4(3)** The EHDI program has an association with the Iowa Title V maternal and child health programs to promote comprehensive services for infants and children with special health care needs.

**3.4(4)** The EHDI program provides hearing screening surveillance and follow-up for infants and children under the age of three. Follow-up may include:

*a.* Contact with the parent or legal guardian of an infant who was not screened or does not pass the initial hearing screening, outpatient hearing screening or diagnostic audiologic assessment.

*b.* Contact with the infant's primary care provider to ensure the infant receives appropriate follow-up no later than the recommended time line as outlined in the Joint Committee on Infant Hearing position statement at [www.jcih.org](http://www.jcih.org).

*c.* Contact with the birthing hospital or health care professional for inquiries on missing results, data entry discrepancies and recommendations for additional referrals.

*d.* Referrals to family support or early intervention service providers for infants or toddlers diagnosed with a hearing loss.

*e.* Technical assistance to birthing facilities, primary care providers and health care professionals regarding best practices related to newborn hearing screening, diagnosis and follow-up best practices.

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